

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 06 FEB -2 AM 11:15

DOCUMENT # B05000000207 1. Entity Name DC CONVENTIONAL-PRESTE, L.P.					
Principal Place of Business 1209 ORANGE STREET WILMINGTON, DE 19801				Mailing Address 1209 ORANGE STREET WILMINGTON, DE 19801	
2. Principal Place of Business 6363 WOODWAY SUITE 1000 HOUSTON TX 77057 HARRIS		3. Mailing Address - SAME -			
Suite, Apt. #, etc. SUITE 1000		Suite, Apt. #, etc. - SAME -		01062006 Chg-LP CR2E003 (11/05)	
City & State HOUSTON TX		City & State HOUSTON TX		4. FEI Number <input checked="" type="checkbox"/> Applied For Not Applicable	
Zip 77057		Country HARRIS		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00					
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	F05000002107		STREET ADDRESS		
NAME	FLORIDA-PRESTE, INC.		CITY-ST-ZIP		
STREET ADDRESS	6363 WOODWAY STE 1000		STREET ADDRESS	700065866667	
CITY-ST-ZIP	HOUSTON, TX 77057		CITY-ST-ZIP	02/15/06--01006--006 **500.00	
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CITY-ST-ZIP			CITY-ST-ZIP		
14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes					
SIGNATURE: <i>Randall Husmann</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			Date: 1/11/2006 Daytime Phone: 713.570.0312		

STAPLE CHECK HERE

RANDALL HUSMANN - CHIEF FINANCIAL OFFICER OF
FLORIDA-PRESTE, INC. - GENERAL PARTNER